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**PALM INTRANET**

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<http://www.painandhealth.org>  
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## Related NINDS Publications and Information

- **Chronic Pain: Hope Through Research**  
Chronic pain information page compiled by the National Institute of Neurological Disorders and Stroke (NINDS).
- **Headache: Hope Through Research**  
Information about headaches, including migraines, compiled by the National Institute of Neurological Disorders and Stroke (NINDS).
- **Trigeminal Neuralgia: Opportunities for Research and Treatment**  
Summary of a workshop, "Trigeminal Neuralgia: Opportunities for Research and Treatment," September 1999.

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These search terms have been highlighted: **neuralgia**

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## Neuralgia explained

**Neuralgia** is pain in a nerve pathway. Generally, **neuralgia** isn't an illness in its own right, but a symptom of injury or a particular disorder. In many cases, the cause of the pain is not known. Older people are most susceptible, but people of any age can be affected.

Almost everyone will experience mild **neuralgia** at some point, but these bouts are usually temporary and tend to ease by themselves within a few days. Some types of **neuralgia** are longer lasting, debilitating and so agonising that a person's quality of life is severely reduced. Trigeminal **neuralgia**, a condition that usually affects one side of the face only, is said to be one of the most painful medical conditions. **Neuralgia** can be managed with medications and physical therapy. Surgery is an option in some resistant cases.

### Symptoms

The symptoms of **neuralgia** include:

- Localised pain.
- The area may be excruciatingly sensitive to touch, and any pressure is felt as pain.
- The pain can be sharp or burning, depending on the affected nerve.
- The affected area is still functional.
- The muscles may spasm.

### Nerve inflammation can trigger neuralgia

Nerve inflammation (neuritis) can trigger **neuralgia**. Causes of neuritis include:

- **Shingles** - inflammation of a nerve, caused by infection with the herpes virus. This common type of **neuralgia** is known as post-herpetic **neuralgia**. The pain may linger long after the shingles rash has disappeared, particularly in areas of the face.
- **Infection** - the nerve can be irritated by nearby infection, such as a tooth abscess.
- **Pressure or injury** - broken bones, slipped vertebral discs (sciatica) or certain tumours can press and irritate a nerve.
- **Syphilis** - in its advanced stages, this sexually transmitted disease

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affects the functioning of the nervous system.

### **Trigeminal neuralgia**

This is the most common type of **neuralgia**, also known as tic douloureux. The trigeminal nerve supplies various areas of the face, including the cheeks and jaw. Trigeminal **neuralgia** is characterised by sudden jolts of shooting pain that usually affect one side of the face only. Sometimes, a person experiences pain on both sides of the face, though at alternating times. The pain may be severe enough to cause spasms of the facial muscles (tic). Trigeminal **neuralgia** turns everyday activities, such as teeth brushing or shaving, into agonising events. Even a gentle breeze blowing on the face can trigger pain. Known causes include multiple sclerosis or tumours pressing against the nerve. Women over the age of 50 years are most commonly affected.

### **Occipital neuralgia**

Irritation of the main nerve that runs from the back of the skull can cause occipital **neuralgia**. This type of headache or pain is dull, throbbing and localised to the back of the head. The pain can sometimes include the forehead. It is suspected that tense muscles or ligaments may press against the nerve, causing irritation, inflammation and subsequent pain. Other causes may include viral infection, trauma to the neck or bad posture.

### **Diagnosis methods**

There are no specific tests for **neuralgia**. Diagnosis relies more on ruling out other possible causes for the pain. Tests may include:

- **Neurological examination** - to determine specific areas of pain.
- **Dental examination** - to check for abscesses that may be irritating nearby nerves.
- **Blood tests** - to check for infection.
- **X-rays** - to see if the affected nerves are being compressed.

### **Treatment options**

Treatment options include:

- **Treatment for the underlying cause** - such as dental treatment and antibiotics for a tooth abscess, or surgery to remove bone from pressing against the nerve.
- **Pain-killing medications** - such as aspirin or codeine.
- **Anticonvulsant medications** - to treat the pain and muscle spasms associated with trigeminal **neuralgia**.
- **Antidepressants** - to help relieve pain in some cases.
- **Surgery** - to desensitise the nerve and block pain messages.
- **Physical therapy** - such as physiotherapy and chiropractic.
- **Alternative therapies** - such as acupuncture, hypnosis and meditation.

### **Where to get help**

- Your doctor.

### **Things to remember**

- **Neuralgia** is pain in a nerve pathway.
- Generally, **neuralgia** isn't an illness in its own right, but a symptom of injury or particular disorders.
- In many cases, the cause of the pain is not known.
- The pain can generally be managed with medication, physical

therapies or surgery.

**Related fact sheets:**

Guillain-Barre syndrome.

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